

SCANNED AT PINCKNEYVILLE CC and E-mailed

by _____ date _____ initials _____ No. _____ pages _____

UNITED STATES DISTRICT COURT

for the

Southern District of Illinois

Rodney StantonCase Number: 17-365-DRH

(Clerk's Office will provide)

Plaintiff/Petitioner(s)

v.

HONEYWELL INTERNATIONAL, INC., ET AL., & GARDNER & STERN CO.

Defendant/Respondent(s)

☒ CIVIL RIGHTS COMPLAINT

pursuant to 42 U.S.C. §1983 (State Prisoner)

☐ CIVIL RIGHTS COMPLAINT

pursuant to 28 U.S.C. §1331 (Federal Prisoner)

☐ CIVIL COMPLAINT

pursuant to the Federal Tort Claims Act, 28 U.S.C. §§1346, 2671-2680, or other law

I. JURISDICTION

Plaintiff:

A. Plaintiff's mailing address, register number, and present place of confinement.

RODNEY STANTON
B65491
P.O BOX 999
PINCKNEYVILLE, IL 62274

Defendant #1:

B. Defendant HONEYWELL INTERNATIONAL INC., is employed as

(a) (Name of First Defendant)

CORPORATION / REGISTERED INTERNATIONALLY

(b) (Position/Title)

with CHAIRMAN, C.E.O., PRESIDENT, OPERATING MANAGER

(c) (Employer's Name and Address)

2768 NORTH US 45 ROADAt the time the claim(s) alleged this complaint arose, was Defendant #1 employed by the state, local, or federal government? ☒ Yes ☐ NoIf your answer is YES, briefly explain: DEFENDANT 1. IS AN INTERNATIONAL CORPORATION THAT OPERATES AS AN AGENT OF THE FEDERAL GOVERNMENT RECEIVING PAYMENT FOR CONSULTATION, AND IS A RECIPIENT OF FEDERAL GOVERNMENT SUBSIDIES

Defendant #2:

C. Defendant GARDNER & STERN CO. is employed as

(Name of Second Defendant)

STEVE (DOE) CITE SUPERVISOR

(Position/Title)

with 5901 N CICERO AVE SUITE # 102

(Employer's Name and Address)

CHICAGO, ILLINOIS 60614

At the time the claim(s) alleged in this complaint arose, was Defendant #2 employed by the state, local, or federal government? ☒ Yes ☐ No

If you answer is YES, briefly explain:

Additional Defendant(s) (if any):

D. Using the outline set forth above, identify any additional Defendant(s).

II. PREVIOUS LAWSUITS

- A. Have you begun any other lawsuits in state or federal court relating to your imprisonment? ☐ Yes ☒ No
- B. If your answer to "A" is YES, describe each lawsuit in the space below. If there is more than one lawsuit, you must describe the additional lawsuits on another sheet of paper using the same outline. Failure to comply with this provision may result in summary denial of your complaint.

1. Parties to previous lawsuits:
Plaintiff(s):

N/A

Defendant(s):

2. Court (if federal court, name of the district; if state court, name of the county):
3. Docket number:
4. Name of Judge to whom case was assigned:
5. Type of case (for example: Was it a habeas corpus or civil rights action?):
6. Disposition of case (for example: Was the case dismissed? Was it appealed? Is it still pending?):
7. Approximate date of filing lawsuit:
8. Approximate date of disposition:

N/A

III. GRIEVANCE PROCEDURE

- A. Is there a prisoner grievance procedure in the institution? ☒ Yes ☐ No
- B. Did you present the facts relating to your complaint in the prisoner grievance procedure? ☐ Yes ☒ No
- C. If your answer is YES,
1. What steps did you take?
 2. What was the result? N/A
- D. If your answer is NO, explain why not.
- E. If there is no prisoner grievance procedure in the institution, did you complain to prison authorities? ☐ Yes ☒ No
- F. If your answer is YES,
1. What steps did you take?
 2. What was the result?
- G. If your answer is NO, explain why not. LAW SUIT UNRELATED TO IMPRISONMENT
- H. Attach copies of your request for an administrative remedy and any response you received. If you cannot do so, explain why not

IV. STATEMENT OF CLAIM

- A. State here, as briefly as possible, when, where, how, and by whom you feel your constitutional rights were violated. Do not include legal arguments of citations. If you wish to present legal arguments or citations, file a separate memorandum of law. If you intend to allege a number of related claims, number and set forth each claim in a separate paragraph. If your claims relate to prison disciplinary proceedings, attach copies of the disciplinary charges and any disciplinary hearing summary as exhibits. You should also attach any relevant, supporting documentation.

IN MAY OF (2010), I WAS AN EMPLOYEE OF GARDNER & STERN CO. AND, I WAS TOLD WE WERE HIRED BY HONEYWELLS CORP, THE COMPANY I WORK FOR IS A RESUE-RESPONSE TEAM. WHEN COMPANY THREATEN TO STRIKE GARDNER & STERN, WE ARE CALLED INTO SERVICE THEM DURING THE STRIKE. I BEGIN WORKING AS A SCOUT/CLIMBER, WORKING AT HONEYWELLS BROUGHT ME IN CONTACT WITH RADIOACTIVE ENVIRONMENT, ALTHOUGH I WAS CHECKED PERIODICALLY FOR RADIOACTIVE CONTAMINATION. I WAS NOT GIVEN THE PROTECTIVE GEAR, OTHER EMPLOYEES OF HONEYWELLS WERE I WAS STILL TOLD TO TRAVEL THROUGH THE AREA OF CONTAMINATION, NOW ON (OCTOBER 3RD 2010). I BEGIN HAVING BREATHING DIFFICULTY, AND WITH INCREASING SHORTNESS OF BREATH (CALLED 911) AND WAS RUSHED TO (MASSACHUSETTS MEMORIAL HOSPITAL) IN METROBOSTON BY AMBULANCE. AND AFTER BEING TREATED AND WAS TOLD SOMETHING WAS GOING ON WITH MY HEART. FROM THE (EMERGENCY RM). NEVER THOUGHT ANYTHING ELSE ABOUT IT JUST OLD AGE, I THEN TOOK A WIK OFF AND RETURN BACK TO HONEYWELLS THEN THE JOB SITE ENDED THREE WKS LATER, WHICH WERE AROUND THE FIRST WIK OF (NOVEMBER 2010) WE PACKED UP AND I BACK TO CHGO, AND ABOUT THE MIDDLE OF DECEMBER, I BEGIN BEING VERY SICK, COULD NOT BREATHE COULD NOT WALK LONG-DISTANCE, GET VERY TIRED COULD NOT SLEEP HAD TO SLEEP SITTING ON A COUCH OR CHAIR, I'D GET UP AND MAKE IT TO THE (EMERGENCY RM). IN THE MIDDLE OF THE NIGHT TO RUSH UNIVERSITY MEDICAL CENTER, AND THEY WOULD KEEP ME FOR TWO OR THREE DAYS AND SEND ME HOME. I STILL DID NOT UNDERSTAND WHY THIS JUST STARTED ALL AT ONCE. EVERY MONTH FOR THE NEXT EIGHT MONTHS. I HOSPITALIZED AT RUSH UNIVERSITY MEDICAL CENTER AND THEY WOULD KEEP ME FOR TWO OR THREE DAYS, AND SEND ME HOME, BECAUSE I DID NOT HAVE INSURANCE. STILL HAD NO CLUE OF WHY THIS JUST HAPPENED ALL OF A SUDDEN. ON THE (EIGHTH MONTH) OF RUNNING THE (EMERGENCY RM). THEY KEPT ME ONE MORNING ALL OF THE DOCTORS ENTERED MY ROOM TO DISCUSS AND EXPLAIN MY CONDITION, TOLD ME "DOCTORS STATED TO ME YOUR HEART IS BEATING AT 25% CAPACITY HAVE YOU LIKE US, TO FIX YOU UP, I WAS TOLD THAT I HAD CONGESTIVE HEART FAILURE. I STILL HAD NO CLUE OF HOW I BECAME SO SICK THAT FAST AFTER WORKING AT (HONEYWELLS) HAD PHYSICAL BEFORE GOING TO SITE. I WAS JUST SO GRATEFUL TO STILL BE LIVING. SO I NEVER QUESTION IT BECAUSE I DID NOT UNDERSTAND THE DANGER OF WORKING AT (HONEYWELLS) BUT FOR YRS, I THOUGHT ABOUT WHY DID I JUST GET SICK ALL OF A SUDDEN. SEPTEMBER 2011 WAS WATCHING (SOUTHERN DISTRICT) LOCAL NEWS, CAME ACROSS THE SCREEN. PEOPLE AT (HONEYWELLS) COMPLAINING ABOUT NOW THEY GETTING SICK FROM WORKING AT (HONEYWELLS) AND ALSO PEOPLE LIVING IN THE AREA TALKING ABOUT THE RADIOACTIVE CONTAMINATION ENVIRONMENT. CALLED PROJECT: SAFE ON OTHER SIDE OF THE FENCE, AND THAT'S HOW I MADE MY DISCOVERY OF HOW I BECAME ILL WITH (CONGESTIVE HEART FAILURE) NOW I'M (LEGALLY DISABLE) BECAUSE OF MY (DEFIBRILLATOR/PACEMAKER IMPLANT), WHICH CHANGED MY LIFE FOREVER. MY (I DOT-CARD) WAS REVOKED BECAUSE I'M NOW LONGER ABLE OR ALLOWED, TO (DRIVE TRUCKS) AGAIN. WHICH WAS MY LIFE, JUST GIVING IN IDEAL OF THE PAIN THAT (HONEYWELLS INTERNATIONAL INC.) HAS MADE ON MY LIFE! SEE IN THE EXHIBITS,

V. REQUEST FOR RELIEF

State exactly what you want this court to do for you. If you are a state or federal prisoner and seek relief which affects the factor duration of your imprisonment (for example: illegal detention, restoration of good time, expungement of records, or parole), you must file your claim on a habeas corpus form, pursuant to 28 U.S.C. §§ 2241, 2254, or 2255. Copies of these forms are available from the clerk's office.

100,000.00 FROM DEFENDANT, HONEYWELL CORP.
FOR COMPENSATORY DAMAGE, 100,000.00 DOLLARS FOR
DAMAGES AND FOR PRESENT AND FUTURE MEDICAL COST
AND ANY DAMAGES THIS HONORABLE COURT DEEMS JUST AND
PROPER.

VI. JURY DEMAND (check one box below)

The plaintiff ☒ does ☐ does not request a trial by jury.

DECLARATION UNDER FEDERAL RULE OF CIVIL PROCEDURE 11

I certify to the best of my knowledge, information, and belief, that this complaint is in full compliance with Rule 11(a) and 11(b) of the Federal Rules of Civil Procedure. The undersigned also recognizes that failure to comply with Rule 11 may result in sanctions.

Signed on: April 5, 2017
(date)

P.O. Box 999
Street Address

Pinckneyville, IL 62274
City, State, Zip

Rodney Stanton
Signature of Plaintiff

Rodney Stanton
Printed Name

B65491
Prisoner Register Number

Signature of Attorney (if any)

EXHIBIT (A)



Massac Memorial

Massac Amb Ser Run Report

Vehicle ID 513802

Agen. ID: Zebra

10/3/2010

Transport Vehicle:

513802

Transporting Unit Arr.Time: 8:24

ORIGINAL

Incident #

00387510

1

Page 2 of 2

Final Assessment:

Time: 8:39

By: 060107489

GCS: 15

RTS: 12

Severity: 2

Airway: Open

Breathing: Normal

Circulation

Strong Radial Pulse

LOC: Alert & Oriented x 3

Head: Within Normal Limits

Back:

Within Normal Limits

Left Pupil: PERRL

Face: Within Normal Limits

Abdomen:

Within Normal Limits

Right Pupil: PERRL

Eye: Within Normal Limits

Pelvic:

Within Normal Limits

Left Lung: Clear

Neck: Within Normal Limits

Ext. Upper

Within Normal Limits

Right Lung: Clear

Chest: Within Normal Limits

Ext. Lower

Within Normal Limits

Blood Sugar: 165

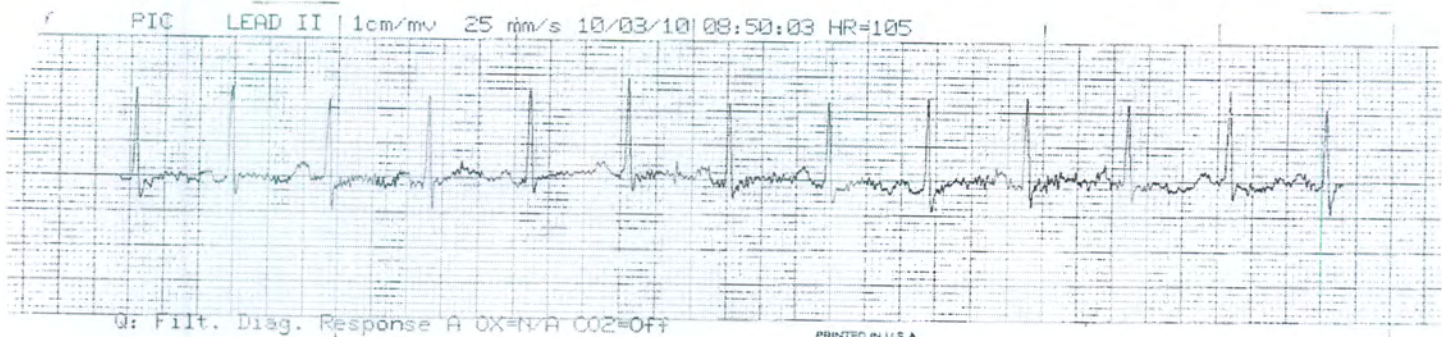
Skin Color: Normal/Pink

Skin Moisture: Normal

Skin Temp: Normal

History of Chief Complaint:

Called to Baymont Inn for a person having difficulty breathing. Upon arrival, found patient sitting upright in chair. Patient was in moderate respiratory distress. Patient stated his breathing difficulty started at approximately 7 am this morning. Patient assisted to ambulance stretcher. Patient denied any history of respiratory illness. Patient positioned sitting upright on stretcher. Patient secured to ambulance stretcher with three seatbelts. Patient alert and oriented X 3. Vital signs taken. Pulse oximeter reading was 90% on room air. Patient placed on 15 liters of oxygen via non-rebreather. Patient placed on cardiac monitor. Cardiac monitor showed a sinus tachycardia rhythm. IV of normal saline established in left AC with 18 gauge cannula at a TKO rate. Patient had wheezing in all lung fields. Patient given albuterol breathing treatment. Medical control contacted. No orders given. Patient transported to Massac Memorial Hospital per patient request. Patient stated relief from breathing difficulty with albuterol treatment and oxygen. Patient pulse oximeter reading was 98% during transport. Patient stated he had coughed up yellow mucous when breathing difficulty started. Patient moved from ambulance stretcher to emergency room bed without assistance. Patient care taken over by emergency room nurse.

Carl Cross
060107489

R

Jason Webster
000273698

EXHIBIT (B)

MASSAC MEMORIAL HOSPITAL
28 CHICK STREET
METROPOLIS, ILLINOIS 62960
RADIOLOGY DEPARTMENT

PATIENT NAME: Stanton, Rodney
DOB: 03/02/1965
PLACE OF SERVICE: Emergency Room
DATE OF SERVICE: 10/03/2010
AGE: 45y
X-RAY #: 58135
PHYSICIAN: Baron Baucom, / No Doctor,
EXAMINATION: CHEST 2 VIEWS
CLINICAL HISTORY: SOB

Exam: Two-view chest.

HISTORY: Shortness of breath. Cough.

No comparisons.

FINDINGS: PA and lateral views of the chest. Diffuse interstitial prominence is seen. There are bilateral perihilar infiltrates. Opacity seen in the right lung base which may be due to the atelectasis or edema. Pneumonia is not excluded. The lungs are hyperexpanded. There are clips at the GE junction.

Impression: Diffuse interstitial prominence. Focal increased air space disease is seen in the right base which may be due to atelectasis. Pneumonia is not excluded. Recommend follow-up.

*** THIS IS AN ELECTRONICALLY VERIFIED REPORT ***
James Borders, M.D.
RADIOLOGIST

D: 10/03/2010 10:10:00 AM
T: 10/03/2010 10:10:00 AM
JJB&BORDERS&JAMES^^20101003101100

Report Viewer

EXHIBIT (c)

Page 1 of 1

cape radiology group

powered by: AMICAS

Name: STANTON,
RODNEY

MRN: MMH-58135

DOB: 1965-03-02

Sex:
M

Accession: 1010030167

Study Date & Time:
10/03/201009:14:39Description: CHEST 2
VIEWS

Interpreter: Borders, James M.D. (10)

Transcriptionist: BORDERS, JAMES (JJB)

===== Begin of Report Content =====

Exam: Two-view chest.

HISTORY: Shortness of breath. Cough.

No comparisons.

FINDINGS: PA and lateral views of the chest. Diffuse interstitial prominence is seen. There are bilateral perihilar infiltrates. Opacity seen in the right lung base which may be due to the atelectasis or edema. Pneumonia is not excluded. The lungs are hyperexpanded. There are clips at the GE junction.

Impression: Diffuse interstitial prominence. Focal increased air space disease is seen in the right base which may be due to atelectasis. Pneumonia is not excluded. Recommend follow-up.

===== End of Report Content =====

EXHIBIT (D)

ILLINOIS DEPARTMENT OF CORRECTIONS
Medical Special Service Referral Denial or RevisionOffender's Name: Stanton, Rodney ID# B65491Referral Date: 1/28/15Initial Proposed Course of Action: River to River Heart Group
Cardiomyopathy post AICD check, Cardiology
requesting Echocardiogram

Alternative Care Recommended: _____

- RECENT INTAKE- PATIENT W/ C/O CP X 2 DAYS PER WEX- DUE FOR AICD
- CHECK AND SEEN BY CARDIOLOGY 1/27/15 FOR EVAL AND AICD CHECK -
- RECEIVED REFERRAL REQUEST FOR ECHO- DISCUSSED IN COLLEGIAL
- 02/02/2015 W/ DR RITZ AND DR POWERS - RECOMMENDED SITE REPRESENT IN
- COLLEGIAL W/ DICTATED CARDIOLOGY NOTE FROM 1/27/15 VISIT

The offender has the right to appeal any adverse decisions through the grievance procedure outlined in 20 Ill. Adm. Code 504: Subpart F.

VACANT
Print Facility Medical Director's Name

VACANT
Facility Medical Director's Signature

2/25/15
Date

Distribution: Offender, Offender's Medical File, and
Health Care Unit Administrator

(Printed on Recycled Paper)

DOC 0255 (Eff. 4/2007)

EXHIBIT (12)

ILLINOIS DEPARTMENT OF CORRECTIONS
Medical Special Service Referral Denial or RevisionOffender's Name: Danton, RodneyID# B65491Referral Date: 1/28/15

Initial Proposed Course of Action:

Post AICD check, River to River Heart Group
consultation, further workup requested for

Alternative Care Recommended:

- PATIENT W/ C/O CP X 2 DAYS PER WEX- DUE FOR AICD CHECK AND SEEN BY
- CARDIOLOGY 1/27/15 FOR EVAL AND AICD CHECK - RECEIVED REFERRAL
- REQUEST ABI'S W/ DOPPLERS - DISCUSSED IN COLLEGIAL W/ DR POWERS AND
- DR RITZ - REQUESTED SITE REPRESENT IN COLLEGIAL W/ THE DICTATED
- NOTE FROM THE 1/27/15 CARDIOLOGY VISIT

The offender has the right to appeal any adverse decisions through the grievance procedure outlined in 20 Ill. Adm. Code 504: Subpart F.

VACANT
Print Facility Medical Director's Name

VACANT
Facility Medical Director's Signature

2/25/15
Date

Distribution: Offender, Offender's Medical File, and
Health Care Unit Administrator

(Printed on Recycled Paper)

DOC 0255 (Eff. 4/2007)

EXHIBIT (F)

ILLINOIS DEPARTMENT OF CORRECTIONS

Medical Special Service Referral Denial or Revision

Offender's Name: Stanton, Rodney ID# 1365491

Referral Date: collegial 6/8/15

Initial Proposed Course of Action:

cancel for Pacemaker check
Ag in Cardiology

Alternative Care Recommended:

- do Pacemaker check
at site by Boston
Pacemaker Company
- needs last Echo report
before repeating
it

The offender has the right to appeal any adverse decisions through the grievance procedure outlined in 20 Ill. Adm. Code 504: Subpart F.

DR. YEN SHAH
Print Facility Medical Director's Name

[Signature]
Facility Medical Director's Signature

6/26/15
Date

Distribution: Offender, Offender's Medical File, and
Health Care Unit Administrator

(Printed on Recycled Paper)

DOC 0255 (Eff. 4/2007)

12XW1511 (5)

ILLINOIS DEPARTMENT OF CORRECTIONS

Offender Medical History

NRC
Facility

HIV Opt-Out:

- ☐ Test
☒ Refused

☒ Reception History☐ Periodic History

Date: 12/23/14

Time: 2:15 ☐ a.m. ☐ p.m.

Offender ID

B65491 STANTON, RODNEY

Age: 49

DOB: 03/02/1965

Race: [

Race: BLK

Sex: M

Gender:

NRC 12/23/2014

87

☐ Other

Subjective:

Past Medical History / History of Present Illness / Family History

Condition	Yes	No	Family History	Explanation
Allergies				
Smoking				
Pediculosis				
Seizures				
Asthma				
Cardiac/HTN				
Diabetic				
Disability (vision, hearing, etc.)				
Communicable Disease				
a. Hepatitis/Jaundice				
b. Hx + PPD/Active TB				
c. STD				
d. HIV + AIDS				
Surgeries				
Hx of Psych Tx				
a. Past Suicide Attempt				
b. Current Suicidal Ideation				
Recent Drug/ETOH use				
Mobility Problems				
a. Assistive Devices				
b. Prosthetics				
c. Specialized Equipment				
Other Medications				
History of Sexual Abuse or Predator				
Oriented x3				
Other:				

Objective: T: 96 ☐ regular ☐ irregular R: 20 ☐ regular ☐ irregular B/P: 143/102
 Height: 5'8" Weight: 220 Vision: RT 20/25 LT 20/25 Corrected: RT 20/ LT 20/
 Behavioral appearance. Hearing loss. Mental status. Evidence of deformity, trauma, and skin conditions. WNL

Assessment:

NKA HTN DM
 Defibrillator
 SGT

Plan: (Check and complete as appropriate)

- Physical Examination: ☒ Urgent ☐ Routine
- Mental Health Referral: ☐ Urgent ☒ Routine
- Health Information Given: ☒ Yes ☐ Refused
- PPD Results: ☐ Positive ☐ Negative
- Chest X-ray performed: ☐ N/A ☐ Yes ☐ No
- Other:

Date PPD Administered: SGT Date PPD Read: 1/1

Reading: mm By:

Print Name of Interviewer: D. Hardy
 Signature: D. Hardy

R & C Use Only

LAB: DEC 23 2014 Sickie Cell: ☐ Yes ☐ No Dental: Panorex: EKG: CXR: Female Only: PAP: Memo:

EXHIBIT (H)

ILLINOIS DEPARTMENT OF CORRECTIONS
Offender Outpatient Progress Notes

Vienna Correctional Center

Offender Information:

Stanton
Last NameRodney
First Name

ID#: B65491

Date/Time	Subjective, Objective, Assessment	Plans
1-16-15 1:36p	Med Rec Note Cont. Sent CXR from 12-31-14 and EKG from 1-8-15 to Toni for review. Awaiting further information on auth #.	J Powers MRA
1-16-15 2:45p	Med Rec Note Received call from Toni, LM nurse, with auth # 814267148 for cardiology eval and pacer check. Called River to River Heart group to schedule appointment. Requesting pacer info to call back Monday.	J Powers MRA

EXHIBIT (I)

ILLINOIS DEPARTMENT OF CORRECTIONS

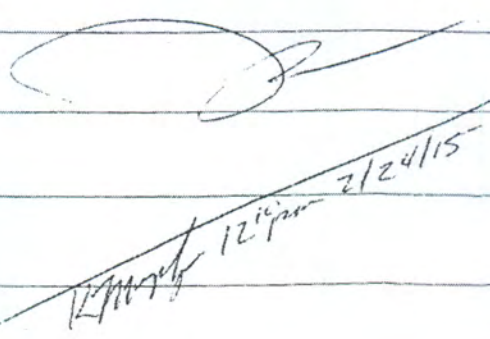
Offender Outpatient Progress Notes

Vienna Correctional Center

Offender Information:

Stanton
Last NameRodney
First Name

ID#: B65491

Date/Time	Subjective, Objective, Assessment	Plans
2.24.15 1145A	MD SICK CALL COMPLAINT: Cardiac Pacer Issues B/P 160/111 T 98.3 P 87 R 18 WT 232	
	(S) c/o left chest pain	
	(O) Began 30 minutes ago He reports that deep breathing + palpitations feels "bad". The pain lasts about 10 minutes, rates pain as 6 levels. There has been going on about 2 days. He is not a good historian, Heart rate, regular at 82.	(P) Monitor 400 mg Tidal PC + 5 days
	(A) Chest Wall Pain: Awarding ABI at Shuman C.C. More interested in inmates in Hall, laughing + talking c/ them.	 2/24/15 12:15pm
2/25/15 1138	HCUA Note Dr. 2255 Medical Service X2 completed for denial to Roberto Rivero Copy sent to Dr. Shuck + offender	Special Denial Appeal Denial Hard Copy

ILLINOIS DEPARTMENT OF CORRECTIONS

Offender Outpatient Progress Notes

Pinckneyville Correctional Center

Offender Information:

Stanton

Last Name

Rodney

First Name

MI

ID#:

B65491

Date/Time	Subjective, Objective, Assessment	Plans
7/2/15	Medical Records Note	
10 ³⁰ AM	Received approval 6/9/15 for pacemaker - auth # 041131999 to be done by Cardiac Diagnostics Today. 7/2/15, I called the company to see how to go about scheduling this. I have scanned the requested information to them for review. They'll call back after they review the information.	
		A. Bruns, Medical Dir.
7/10/15	Medical Records Note	
12 ³⁵ PM	Received non-approval 6/9/15 for an echocardiogram. Dr. Shah completed the "Medical Special Service Referral Denial or Revision" form on 6/26/15. On 7/9/15 appropriate copies were made and distributed. Originals filed in chart. - A. Bruns, Medical Dir.	

Offender Outpatient Progress Notes

Offender Information:

Stanton
Last Name

Rodney
First Name

M

ID#: B65491

Distribution: Offender's Medical Record

Printed on Recycled Paper

DOC 0084 (Eff. 9/2000)
(Replaces DC 714)

LOEVY & LOEVY

311 N. Aberdeen St., 3rd Floor, Chicago, Illinois 60607

June 9, 2016

CONFIDENTIAL LEGAL CORRESPONDENCE

Via U.S. Mail

Rodney Stanton B65491
Pinckneyville Correctional Center
P.O. Box 999
Pinckneyville, IL 62274

Re: Your request for legal representation

To Rodney Stanton:

This letter is to inform you that after reviewing your file, we are unfortunately unable to take your case.

Please be advised that there are time limitations that govern the period in which a claim or lawsuit may be filed. Such time periods depend on the cause of action you may wish to pursue. However, we encourage you to follow up with other attorneys immediately to ensure that all legal rights are fully explored and protected.

We appreciate your decision to contact us, and wish you the best of luck in pursuing your claims.

Sincerely,

Loevy & Loevy



March 28, 2016

SENT VIA REGULAR MAIL

Mr. Rodney Stanton
Reg. No. #B65491
P.O. Box 999
Pinckneyville, IL 62274

LEGAL MAIL

RE: Toxic Tort Claim
Stanton v. Honeywell Corp., et al., Case No. 15-cv-1223

Dear Mr. Stanton:

Thank you for giving us the opportunity to evaluate your potential case. Please be advised that Ms. Lauren Boaz no longer works at our firm. After reviewing the information you provided, we regret to inform you that Gori Julian & Associates, P.C. will not be able to represent you at this time. On behalf of Gori Julian & Associates, P.C. we have closed your file and the attorney-client relationship has ended.

We are only giving you the opinion of our law firm. We do not consider our opinion as final and absolute on the matter. If you wish to seek a second opinion, we urge you to do so as soon as possible. Each state prescribes a statute of limitations applicable to these claims. The statute of limitations defines the period within which a lawsuit must be filed, or the claim can be permanently barred. As such, time is of the essence.

Thank you so much for giving us the opportunity to review your potential claim. If you have any questions, feel free to contact our office.

Very truly yours,
A handwritten signature in black ink, appearing to read 'D. Todd Mathews'.

D. Todd Mathews

DTM/clf



**Chicago Lawyers' Committee
for Civil Rights Under Law, Inc.**

Chicago's Partnership for Equal Justice

March 28, 2016

Mr. Rodney Stanton, #B-65491
Pinckneyville Correctional Center
5835 State Route 154
P.O. Box 999
Pinckneyville, IL 62274

Re: Request for Legal Assistance

Dear Mr. Stanton:

The work of the Chicago Lawyers' Committee is largely restricted to litigation addressing civil rights violations in hate crimes, employment and housing discrimination. It follows that your case is not one in which we would normally become involved.

I hope that our determination does not deter you from seeking assistance elsewhere. Good luck in your efforts to resolve your problem.

Sincerely,

A handwritten signature in black ink, appearing to read 'Elesha Jackson', with a long horizontal flourish extending to the right.

Elesha Jackson
Office Manager

UNITED STATES DISTRICT COURT
for the

Southern District of Illinois

Rodney STANTON
Plaintiff(s)

v.
Honeywell International, Inc, et al
Defendant(s)

Case Number: 17-365-DRT

CERTIFICATE OF SERVICE

I hereby certify that on _____, I electronically filed _____

_____ with the Clerk of Court using the
CM/ECF system which will send notification of such filing(s) to the following:

and I hereby certify that on [date], I mailed by United States Postal Service, the
document(s) to the following non-registered participants:

Respectfully submitted,

Rodney Stanton
Name of Password Registrant
P.O. Box 999
Address
Pinckneyville, IL 62274
City, State, Zip

Phone: () -

Fax: () -

E-mail: @

Attorney bar number (if applicable)